

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VAN		07-31-01
O.I.P.E. CLASSIFIER	SM	32	8/9
FORMALITY REVIEW	PD	1027	09/06/01
RESPONSE FORMALITY REVIEW	AM	917	10-02-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	1/12/02
2	1/12/02
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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330
10-06-01
156
10-25-01